

**District Court
Probate Division**

Judicial District: _____

Case Type: 14, Conservatorship

AFFIDAVIT IN SUPPORT OF PETITION TO SELL REAL PROPERTY

[illegible]

1. That affiant is the duly appointed conservator of the estate of above-referenced protected person, appointed on _____.

2. That the conservator has been and will be responsible for the administration of the conservatorship.

3. That during the time the conservator has been involved in the administration of the conservatorship, the conservator has had an opportunity to review the assets and outstanding bills, has visited the protected person, and has secured and protected the house located at _____.

4. That the protected person currently resides at _____.

5. That the income of the conservatorship consists of _____ in the amount of \$_____ per month and income from _____ in the amount of \$_____ per month and from _____ in the amount of \$_____ per month.

6. That the assets of the conservatorship consist of an interest in the _____ County real estate with an assessed market value of \$_____, and the personal property as listed in the inventory of the conservator in the amount of \$_____.

7. That the real estate taxes, utilities, and insurance expenses in connection with the properties are in excess of \$_____ per year.

8. That the homestead should be sold for the following reasons:

- a. The property is earning no income;
- b. The protected person is not in need of the house for the protected person's residence;
- c. The protected person is not able to return to independent living;
- d. By selling the property the conservator would increase the income of the conservatorship;
- e. The Department of Economic Assistance requires the property to be sold in order for the conservatee to be eligible for Medical Assistance benefits; and
- f. It is in the best interest of the protected person.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

FURTHER YOUR AFFIANT SAYETH NOT.

Dated:_____

Petitioner / Affiant

Name of Petitioner's Attorney:

Name: _____

License No. _____

Address: _____

City/State/Zip: _____

E-mail address _____